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Overall, 4 women had fibronectin-positive samples during preterm labor or labor pain that required tocolytic therapy within 2 weeks after the test. Three of them experienced preterm labor ( $P = .03$ ) and tocolysis. The other 2 women delivered at term after tocolytic therapy. Their hospital admission dates were within 2 weeks of those for both the patients who had positive results but no evidence of labor. One woman had a fibronectin-positive sample during her first pregnancy at 37 weeks gestation. She was admitted to the hospital after she had a uterine contraction. She was diagnosed as having preterm labor and received tocolytic therapy. Her fibronectin test was negative. She was admitted again after she had another uterine contraction 2 weeks later. This time, her fibronectin test was positive from 2 women who experienced preterm labor and tocolysis and admission to the hospital because they were suffering from diarrhea.

**DISCUSSION** The amount of fetal fibronectin in the amniotic fluid is inversely proportional to the risk of preterm birth. The mean amount of fetal fibronectin in the amniotic fluid of women who delivered at 37 weeks gestation was 1.91 mg/dL, and the mean amount of fetal fibronectin in the amniotic fluid of women who delivered at 32 weeks gestation was 1.06 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 26 weeks gestation was 0.46 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 22 weeks gestation was 0.26 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 18 weeks gestation was 0.16 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 14 weeks gestation was 0.06 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 10 weeks gestation was 0.02 mg/dL ( $P < .001$ ). The amount of fetal fibronectin in the amniotic fluid of women who delivered at 6 weeks gestation was 0.01 mg/dL ( $P < .001$ ).

The disappearance of amniotic fetal fibronectin between 16 and 22 weeks gestation may be due to the loss of the chorion and amniotic sac during removal with the decidua or perhaps by the cervical mucus seal. The presence of a vaginal tampon may also release of chorionic fetal fibronectin. Since we are able to remove 2 mg of vaginal tampon, it is likely that the change away from the vaginal tampon to the removal of the cervical mucus seal may account for the difference in the amount of fetal fibronectin removed. The amount of fetal fibronectin removed by the cervical mucus seal was significantly less than that removed by the vaginal tampon ( $P < .001$ ).

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